1412544

FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION



07077855

OMB APPROVAL				
OMB Number:	3235-0076			
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SEC USE ONLY				
Prefix		Serial		
DATE RECEIVED				

Name of Offering (Check if this is an amendment and name has changed, and indicate change.)
Shares in RQS Migration Fund Ltd.
Filing Under (Check box(es) that apply):
A. BASIC IDENTIFICATION DATA
1. Enter the information requested about the issuer Name of Issuer (Check if this is an amendment and name has changed, and indicate change.) RQS Migration Fund Ltd.
Address of Executive Offices (Number and Street, City, State, Zip Code) c/o Roxbury Capital Management, LLC, 100 Wilshire Blvd, Ste 1000, Santa Monica, CA 90401 Telephone Number (Including Area Code) (310) 917-5600
Address of Principal Business Operations (if different from Executive Offices) (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)
Brief Description of Business Investment Fund
Type of Business Organization
□ corporation □ limited partnership, already formed □ other (please specify): □ business trust □ limited partnership, to be formed
Actual or Estimated Date of Incorporation or Organization: Month Year Organization: Month Year DROCESS
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) FN OCT 0 2 201
GENERAL INSTRUCTIONS FINANCIAL
Federal:
Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.
Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.
Filing Fee: There is no federal filing fee.
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.
ATTENTION —
Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the

SEC 1972 (6-02)

filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number

appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the

A. BASIC IDENTIFICATION DATA

- Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Each general and managing partner of partnership issuers.						
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, if in	dividual)		,		· · · · · · · · · · · · · · · · · · ·	
Roxbury Capital Management	<u> </u>					
Business or Residence Address 100 Wilshire Blvd, Ste 1000,	•	Street, City, State, Zip Code	2)			
	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, if in	dividual)					
Beh, Brian Business or Residence Address	Oliverhan and	Street, City, State, Zip Code	<u> </u>			
c/o Roxbury Capital Manager		-				
Check Box(es) that Apply:		☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
		-				
Full Name (Last name first, if in Gudorf, Kenneth	dividual)					
Business or Residence Address	(Number and	Street, City, State, Zip Code)			
c/o Roxbury Capital Managem	ent, LLC, 100 V	Wilshire Blvd, Ste 1000, Sa	inta Monica, CA 90401			
Check Box(es) that Apply:] Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, if in	dividual)		·			
Otterlei, John						
Business or Residence Address	••	Street, City, State, Zip Code	•	•		
c/o Roxbury Capital Managem	ent, LLC, 100 \	Wilshire Blvd, Ste 1000, Sa	nta Monica, CA 90401			
Check Box(es) that Apply:] Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner	
Full Name (Last name first, if in	dividual)					
Business or Residence Address	(Number and	Street, City, State, Zip Code)			
Check Box(es) that Apply:] Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, if in	dividual)					
B :						
Business or Residence Address	(Number and	Street, City, State, Zip Code)			
Check Box(es) that Apply:] Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)						
Desires of residence (tagles)	(14million and	ancet, exy, mate, zip code		·		
Check Box(es) that Apply:] Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner	
Full Name (Last name first, if individual)						
Business or Residence Address	(Number and	Street, City, State, Zip Code)			
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)						

B. INFORMATION ABOUT OFFERING						
	Yes	No				
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?		Ø				
Answer also in Appendix, Column 2, if filing under ULOE.						
2. What is the minimum investment that will be accepted from any individual?	\$ 100,000					
Does the offering permit joint ownership of a single unit?	Yes ⊠	No □				
Does the offering permit joint ownership of a single unit?	W	u				
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a						
person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a						
broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual)						
Survivality (2000 initial visual visu						
Business or Residence Address (Number and Street, City, State, Zip Code)						
Name of Associated Broker or Dealer						
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Cheek #All Coney) or short individual Source)	_					
(Check "All States" or check individual States) AL AK AZ AR CA CO CT DE DC FL (☐ AI	I States				
IL IN IA KS KY LA ME MD MA MI J	MN MS	мо				
MT NE NV NH NJ NM NY NC ND OH	OK OR	PA				
RI SC SD TN TX UT VT VA WA WV	WY WY	PR				
Full Name (Last name first, if individual)	,					
Business or Residence Address (Number and Street, City, State, Zip Code)						
Districts of Nestocite Address (Number and Street, City, State, 21p Code)						
Name of Associated Broker or Dealer						
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers						
(Check "All States" or check individual States)	·······	l States				
AL AK AZ AR CA CO CT DE DC FL (GA HI	D				
IL IN IA KS KY LA ME MD MA MI F	MN MS	МО				
MT NE NV NH NJ NM NY NC ND OH C	OK OR	PA				
RI SC SD TN TX UT VT VA WA WV V	WY WY	PR				
Full Name (Last name first, if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)						
Daniels of Nestable Addies (Namber and Steer, City, State, Elp Code)						
Name of Associated Broker or Dealer						
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers						
(Charles MAII Charles Annie An						
(Check All States of check individual States)						
AL AK AZ AR CA CO CT DE DC FL C						
II. IN IA KS KY LA ME MD MA MI I	GA HI	ID				

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	.	A moving Almostic
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt		_ s
	Equity	500,000,000	.0C _{\$} 775,000.00
	✓ Common ☐ Preferred		
	Convertible Securities (including warrants)	S	\$
	Partnership Interests	<u> </u>	s
	Other (Specify)	S	\$
	Total	500,000,000	0.0(\$ 775,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		
	Non-accredited Investors		
	Total (for filings under Rule 504 only)		
3.	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		s
	Regulation A		
	Rule 504		
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	[] \$
	Printing and Engraving Costs] \$
	Legal Fees		\$_25,000.00
	Accounting Fees	[] \$
	. Engineering Fees	[
	Sales Commissions (specify finders' fees separately)		
	Other Expenses (identify)] \$
	Total	_	\$ 25,000.00

36 36	CAOFFERING PRICE, NUM	BER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS		
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross	5	499,975,000.00	
5.	Indicate below the amount of the adjusted gross proceeds to the jurposes shown. If the amount for an check the box to the left of the estimate. The total or proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate and f the payments listed must equal the adjusted gross	j		
			Payments to Officers, Directors, & Affiliates	Payments to Others	
	Salaries and fees		y \$_9,999,500.	<u> </u>	
	Purchase of real estate		□ \$	□ s	
	Purchase, rental or leasing and installation of mad and equipment	chinery		s	
	Construction or leasing of plant buildings and fac	ilities		<u></u>	
	Acquisition of other businesses (including the val offering that may be used in exchange for the asset issuer pursuant to a merger)	ets or securities of another	□\$	□s	
	Repayment of indebtedness			_	
	Working capital		_	_	
	Other (specify): Investments				
	Column Totals		Ø \$ 9,999,500.0	0 S 489,975,500.00	
				\$_499,975,000.00	
		SD FEDERAL SIGNATURE	\$ 14 TH (0.7 - 7)	ECONOMIC CONTRACTOR	
sigr	issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	nish to the U.S. Securities and Exchange Commi	ssion, upon writte		
İssı	er (Print or Type)	Signature	Date	1	
RC	S Migration Fund Ltd.	A (21)	09/11	F0)	
Nar	ne of Signer (Print or Type)	Title of Signer (Print or Type)			
3ria	n Beh	Director			
	* <u>,</u>	<u> </u>			

END

ATTENTION -

intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)